11-07-05

ATE	E		PART B - FEE(S) TRANSMITTAL					184	
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	APPLICATION NO. FILING DATE		FIRST NAMED INVI		D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/732,85	10/732,858 12/09/2003		George		Muller		9516-248-999	9123	
TITLE OF INVEN	NTION: PH	ARMACEUTICALLY AC	TIVE ISOINDOL	INE DERIVA	ATIVES		. • • •		
APPLN. TY	APPLN. TYPE SMALL ENTITY		ISSUE FEE		PU	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisio	nonprovisional NO		\$1400			\$300	\$1700	11/10/2005	
EXAMINER			ART UNIT		CI	ASS-SUBCLASS		· · *	
COVINGTON, RAYMOND K			1625		514-303000		*.		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON 1					2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
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	Fee (No sm	all entity discount permitte		Payment	A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to be posit Account Number (enclose an extra copy of this form).				
Advance Or				Deposit Acc	count Nu	nber 50-3013	harge the required fee(s), or continuous an extra c	opy of this form).	
a. Applicant	t claims SM	from status indicated above	37 CFR 1.27.				LL ENTITY status. Sec 37 C	107(-7	
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Typed or printe	ed name <u>V</u> A	Obbil Mon (52,	1042) for Ar	strony 1	₩. <u>7</u> 6	SegNC Registration	No. 35,203		
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